

To be filed with the **SECRETARY OF THE STATE** not later than 4 p.m. on the fourteenth day after close of the convention (or if such fourteenth day is a Saturday, Sunday, or legal holiday, not later than 4 p.m. on the next succeeding business day), in accordance with §§9-388 and 9-2 of the General Statutes. **NOTE:** This form is to be used only by **party-endorsed candidates** for **multi-town district office** (i.e, Representative in Congress; State Senator; State Representative from **Assembly Districts which cross town lines**; Judge of Probate from **Probate Districts of two or more towns**).

CERTIFICATE OF PARTY ENDORSEMENT

At a convention of the delegates of the **Republican Party** for the [check ONE only; insert appropriate *Congressional, Senatorial, or Assembly District Number; or Probate District Name*]

_____ Congressional District
(District number)

_____ Senatorial District
(District n)

Probate District of _____

X 103 Assembly District, (District number)

2014 MAY 28 AM 11:13
SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION SERVICES

Held at Cheshire Senior Center 240 Maple Ave Cheshire on the 14 day of May 2014,

I WAS ENDORSED BY SUCH CONVENTION FOR ADMINISTRATION OF THE OFFICE OF

Representative in Congress State Senator State Representative Judge of Probate

For said district, for the State Election to be held on November 4, 2014; and

I authorize my name to appear on the ballot as printed or typed below:

Al Adinolfi 235 Sorghum Mill Drive Cheshire, CT 06410
(Print or type name in (Full Residence Address--Street) (Town) (Zip)

Exactly the form in which you
Authorize it to appear on ballot)

Dated at 5/14/2014 Ceshire Senior Center Connecticut, this 14 day of May 2014.

Alfred C Adinolfi
Signature of Candidate

ATTESTED BY:

David Borowy
Signature of Chairman or Presiding
Officer of Convention
David Borowy

OR *William A Koche*
Signature of Secretary of Convention
Bill Koche

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CERTIFICATE OF PARTY ENDORSEMENT

At a convention of the delegates of the Democratic Party for the [check ONE only; insert appropriate] Congressional, Senatorial, or Assembly District Number; or Probate District Name]

SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION
MAY 21 9 05 AM '14

_____ Congressional District
(District number)

_____ Senatorial District
(District number)

Probate District of _____
(Probate District Name)

10 3rd Assembly District,
(District number)

held at Cheshire Senior Center 240 Maple Ave on the 20th day of May, 2014,
(location of convention) (date)

I was endorsed by such convention as candidate for nomination to the office of [check ONE]

Representative in Congress State Senator State Representative Judge of Probate

for said district, for the State Election to be held on November 4, 2014; and

I authorize my name to appear on the ballot as printed or typed below:

Kristen Selleck 482A Radmore Rd. Cheshire 06460
(Print or type name in (Full Residence Address--Street) (Town) (Zip)

exactly the form in which you authorize it to appear on ballot)

Dated at Cheshire, Connecticut, this 20th day of May, 2014.

Kristen Selleck
Signature of Candidate

ATTESTED BY:

A. D. Pietro
Signature of Chairman or Presiding Officer of Convention

OR

Aleta G. Looker
Signature of Secretary of Convention

IMPORTANT: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made NO ENDORSEMENT OF ANY CANDIDATE for the office. (§9-388) File with Secretary of the State, Legislation & Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.